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U.S. PTO
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121103

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UTILITY PATENT APPLICATION TRANSMITTAL (new nonprovisional applications under 37 CFR 1.53 (b))

Attorney Docket Number: KCC 4978 (K-C 19,075)

First Named Inventor: Daron C. Hill

Title: SYSTEM AND METHOD PREDICTING AND MANAGING NETWORK
CAPACITY REQUIREMENTS

Express Mail Label Number: EV271812161US

TO: Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

APPLICATION ELEMENTS

1. Fee Transmittal Form
(original and duplicate)
2. Applicant claims small entity status
3. Specification [Total Pages 38]
4. Drawings [Total Sheets 4]
5. Oath or Declaration [Total Pages]
 - a. Newly executed (original or copy)
 New (unexecuted)
 - b. Copy from a prior application
(for continuation/divisional with
Box 19 completed)
 - i. DELETION OF INVENTOR(s)
Signed statement attached
deleting inventor(s) named
in prior application.

6. [] Incorporation By Reference
(useable if Box 5b is marked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

7. [X] Application Data Sheet

8. [] CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

9. [] Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

a. [] Computer Readable Form

b. [] Specification Sequence Listing on:
i. [] CD-ROM or CD-R (2 copies); or
ii. [] paper

c. [] Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. [] Assignment Papers (cover sheet & document(s))

11. [] 37 CFR 3.73(b) Statement [] Power of Attorney

12. [] English Translation Document (if applicable)

13. [] IDS with PTO/SB/08A [] Copies of IDS Citations

14. [] Preliminary Amendment

15. [X] Return Receipt Postcard

16. [] Request and Certification for Non-Publication. Form PTO/SB/35 is attached.

17. [] Certified Copy of Priority Document(s) if foreign priority is claimed

18. [] Other: _____

**IF A CONTINUING APPLICATION, CHECK APPROPRIATE
BOXES AND SUPPLY THE REQUISITE INFORMATION**

19. [] Continuation [] Divisional [] Continuation-in-Part
of prior application No.: _____

[] Complete Application based on provisional Application
No. _____

Prior application information: Examiner:
Group Art Unit:

CORRESPONDENCE ADDRESS

20. Correspondence Address: Customer Number 321
Attention: Frank R. Agovino

Respectfully submitted,

Frank R Agovino

Frank R. Agovino, Reg. No. 27,416

FRAcwa